

Sep 20 03 10:49p

Yellowcab

Posted 1-23-19  
@ 12:30 pm - js

1-843-681-6215

p.1

2012-324

## CLASS C AMENDMENT FORM

<b>Mail or Fax a copy of this form to:</b>  <b>Public Service Commission of South Carolina Clerk's Office</b> <b>101 Executive Center Dr., Ste 100</b> <b>Columbia, S.C. 29210</b>  <b>PHONE (803) 896-5100</b> <b>FAX (803) 896-5199</b>	<b>Need Assistance with completing the Form?</b>  <b>SC Office of Regulatory Staff</b> <b>Transportation Department</b>  <b>PHONE: (803) 737-0800</b>
--	--

DATE: 01/23/2019

I have the following Certificate:

☐ Class C Taxi # \_\_\_\_\_
 ☒ Class C Charter # 8655
 ☐ Class C Charter Bus # \_\_\_\_\_  
☐ Class C Non-Emergency # \_\_\_\_\_
 ☐ Class C Stretcher Van# \_\_\_\_\_

Please consider this as my request for the following amendment(s) to my Certificate:

☒ **Name Change**

From: Hilton Head Limousine Co. Inc DBA: \_\_\_\_\_  
 (Current Name) (Current DBA if applicable)

TO: Hilton Head Limousine Co. Inc DBA: Yellow Transportation  
 (New Name) (New DBA if applicable)

☐ **Scope of Authority**

From: \_\_\_\_\_ To: \_\_\_\_\_  
 (Current Scope) (New Scope)

☐ **Passenger Limit**

From: \_\_\_\_\_ To: \_\_\_\_\_  
 (Current Limit Number) (New Limit Number)

Tim P. Griffen  
 (Name & DBA if DBA is applicable)

Hilton Head Island, SC 29925  
 (City, State, Zip Code)

843-686-6666  
 (Telephone Number)

374 Spanish Wells Rd 1B/PO Box 22348  
 (Street and/or Mailing Address)

[Signature]  
 (Signature)

President  
 (Title) Owner, President, etc.

RECEIVED  
 JAN 23 2019  
 PSC SC  
 CLERK'S OFFICE